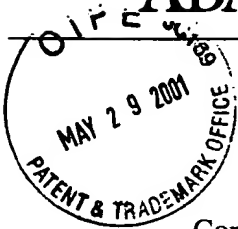


3724  
18 Ignacio Valley Road, #230  
Walnut Creek, California 94598  
Phone: (925) 906-9026  
Fax: (925) 906-9023

# ADAMS LAW OFFICE



May 8, 2001

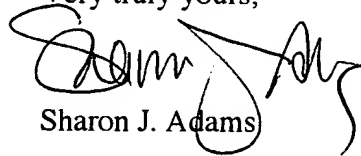
Commissioner for Patents and Trademarks  
Washington, D.C. 20231

Re: Patent Application No. 09/732,649  
Applicant: Kevin W. McLaughlin  
Title of Invention: Magnetic Knife Sheath

Dear Commissioner:

I received an Informality Re Payment of Fee letter. I am including a check for \$135.00 to cover the deficiency.

Very truly yours,

  
Sharon J. Adams

Enclosure

cc: Kevin McLaughlin

RECEIVED  
JUN 05 2001  
TECHNOLOGY CENTER R3700



UNITED STATES DEPARTMENT OF COMMERCE  
Patent and Trademark Office

Address: COMMISSIONER OF PATENTS AND TRADEMARKS  
Washington, D.C. 20231

| SERIAL NUMBER | FILING DATE | FIRST NAMED APPLICANT | ATTORNEY DOCKET NO. |
|---------------|-------------|-----------------------|---------------------|
| 09732649      | 12/11/00    | MCLAUGHLIN            | K M00-110           |

ADAMS LAW OFFICE  
SHARON J. ADAMS  
1867 YGNACIO VALLEY RD., #230  
WALNUT CREEK CA 94598

QM21/0427

| EXAMINER |              |
|----------|--------------|
| PAYER, H |              |
| ART UNIT | PAPER NUMBER |
| 3724     |              |

DATE MAILED: 04/27/01

05/31/2001 MADD11 00000063 09732649  
01 FC:203 135.00 OP

INFORMALITY RE PAYMENT OF FEE

The informality regarding the payment of the fee in connection with ☒ the original filing ☐ the amendment filed \_\_\_\_\_ is indicated below.

A. FEE DUE

- ☐ The amendment is considered incomplete in that the funds in Deposit Account No. \_\_\_\_\_ are insufficient to cover the entire fee due. The balance is due within the period set below.
- ☐ The amendment is considered an incomplete response, in that payment of \$ \_\_\_\_\_ is insufficient to cover the claims as shown in the attached Patent Application Fee Determination Record. Remittance is due within the period set below.
- ☐ The amendment has not been entered, since applicant has failed to remit (or authorize charge to a Deposit Account) the fee as indicated on the attached Patent Application Fee Determination Record. Remittance or authorization is due within the period set below.
- ☒ The filing fee of \$ 355.00 submitted in this application is insufficient.  
A balance of \$ 135.00 is due for additional claims.
- ☒

APPLICANT IS GIVEN THE REMAINDER OF THE SET PERIOD FOR RESPONSE,  
OR ONE (1) MONTH FROM THE DATE OF THIS LETTER, WHICHEVER IS LONGER,  
WITHIN WHICH TO REMIT THE FEE OF \$ 135.00.

B. EXCESS PAYMENT:

- ☐ It is noted that payment of \$ \_\_\_\_\_ is in excess of the amount necessary to cover the claims now in the application. See the attached Patent Application Fee Determination Record.

This matter of refund or credit to your account is being referred to the Finance Officer, for his consideration.

*Timothy S. Hart*  
CLERK OF GROUP

|                |            |                          |                 |
|----------------|------------|--------------------------|-----------------|
| REF ID: A61111 | FILED DATE | INVENTOR NAMED APPLICANT | ATTY DOCKET NO. |
|----------------|------------|--------------------------|-----------------|

EXAMINER

ART UNIT PAPER NUMBER

DATE MAILED:

## NOTICE OF INSUFFICIENT FILING FEES

APPLICANT IS GIVEN 30 DAYS FROM THE DATE OF MAILING OF THIS NOTICE WITHIN WHICH TO SUBMIT THE BALANCE DUE. Extension of this 30 day period under CFR 1.136(a) will not be permitted. Failure to respond within this period will result in the application becoming abandoned. 35 U.S.C. 133.

The filing fees submitted in connection with this application are insufficient. See the attached Patent Application Fee Determination Record (Form PTO-875). The balance due for additional claims and/or multiple dependent claims is summarized below:

☐ A. Filing Fees due upon filing the application

|                            |      |                  |
|----------------------------|------|------------------|
| Total Filing Fees Due      | = \$ | <u>135</u>       |
| Less Filing Fees Submitted | = \$ | <u>( 355.1 )</u> |
| BALANCE DUE                | = \$ | <u>490</u>       |

☐ B. Fees due in connection with the amendment filed on \_\_\_\_\_

|                     |      |                     |
|---------------------|------|---------------------|
| Total Fees Due      | = \$ | <u>        </u>     |
| Less Fees Submitted | = \$ | <u>(          )</u> |
| BALANCE DUE         | = \$ | <u>        </u>     |

ATTACHMENT: FORM PTO-875

Clerk of Court

APPLICANT: PLEASE COMPLETE THIS PORTION AND RETURN THIS NOTICE WITH PA Fee submitted \$ \_\_\_\_\_ Signature \_\_\_\_\_

### CERTIFICATE OF MAILING

I hereby certify that this notice and the required additional fee are being deposited with the U.S. POSTAL SERVICE in an envelope addressed to:

A Commissioner of Patents and Trademarks, Washington, D.C. 20590, or ( ) \_\_\_\_\_

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

PTOL 319 (Rev. 7-72)